

## Complete Summary

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### TITLE

Major depression in adults in primary care: percentage of patients who have a depression follow-up contact within three months of initiating treatment.

### SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Major depression in adults in primary care. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2006 May. 81 p. [201 references]

## Measure Domain

### PRIMARY MEASURE DOMAIN

#### Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

### SECONDARY MEASURE DOMAIN

Does not apply to this measure

## Brief Abstract

### DESCRIPTION

This measure is used to assess the percentage of patients who have a depression follow-up contact\* within three months of initiating treatment.

\*Contact = an office visit with physician or other care provider, phone, other.

### RATIONALE

The priority aim addressed by this measure is to improve the frequency of assessment of response to treatment in patients with major depression.

### PRIMARY CLINICAL COMPONENT

Major depression; follow-up contact

## DENOMINATOR DESCRIPTION

Number of primary care patients reviewed greater than 18 years with new diagnosis\* of major depression in the previous six months

\*New diagnosis = no diagnosis in the six-month period prior to the target quarter.

## NUMERATOR DESCRIPTION

Number of patients who have a depression follow-up contact\* within three months of initiating treatment

\*Contact = an office visit with physician or other care provider, phone, other.

## Evidence Supporting the Measure

### EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

### NATIONAL GUIDELINE CLEARINGHOUSE LINK

- [Major depression in adults in primary care.](#)

## Evidence Supporting Need for the Measure

### NEED FOR THE MEASURE

Unspecified

## State of Use of the Measure

### STATE OF USE

Current routine use

### CURRENT USE

Internal quality improvement

## Application of Measure in its Current Use

### CARE SETTING

Physician Group Practices/Clinics

### PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians

#### LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Group Clinical Practices

#### TARGET POPULATION AGE

Age greater than 18 years

#### TARGET POPULATION GENDER

Either male or female

#### STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

### Characteristics of the Primary Clinical Component

#### INCIDENCE/PREVALENCE

Depression is common, with a lifetime risk for major depressive disorder of 7% to 12% for men and 20% to 25% for women.

#### EVIDENCE FOR INCIDENCE/PREVALENCE

Institute for Clinical Systems Improvement (ICSI). Major depression in adults in primary care. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2006 May. 81 p. [201 references]

#### ASSOCIATION WITH VULNERABLE POPULATIONS

- Women (see "Incidence/Prevalence" field)
- Depression in the elderly is widespread, often undiagnosed and usually untreated. Depression in adults older than 65 years of age ranges from 7 to 36 percent in medical outpatient clinics and increases to 40 percent in the hospitalized elderly.

#### EVIDENCE FOR ASSOCIATION WITH VULNERABLE POPULATIONS

Institute for Clinical Systems Improvement (ICSI). Major depression in adults in primary care. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2006 May. 81 p. [201 references]

#### BURDEN OF ILLNESS

- The estimate of the lifetime prevalence of suicide in patients ever hospitalized for suicidality is 8.6%. The lifetime risk is 4% for affective disorder patients hospitalized without specification of suicidality.
- The lifetime rate of suicide attempts is 7% in uncomplicated (no other psychiatric diagnosis) panic disorder and 7.9% in major depression. 19.8% of patients with comorbid panic disorder and major depression have attempted suicide.
- Persons with major depression have a 4.8 times greater risk for work disability than asymptomatic individuals and report significantly poorer intimate relationships and less satisfying social interactions.
- Major depression is associated with an increased risk of developing coronary artery disease, and has also been shown to increase the risk of mortality in patients after myocardial infarction by as much as four-fold.

## EVIDENCE FOR BURDEN OF ILLNESS

Institute for Clinical Systems Improvement (ICSI). Major depression in adults in primary care. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2006 May. 81 p. [201 references]

## UTILIZATION

Unspecified

## COSTS

Unspecified

## Institute of Medicine National Healthcare Quality Report Categories

## IOM CARE NEED

Getting Better  
Living with Illness

## IOM DOMAIN

Effectiveness

## Data Collection for the Measure

## CASE FINDING

Users of care only

## DESCRIPTION OF CASE FINDING

Adults greater than 18 years with a new primary care diagnosis\* of major depression

Claims, encounter data, scheduling information, or list of diagnosis codes from other automated sources may be used to identify those patients who meet the inclusion criteria for this measure. A random sample of 20 patients is suggested. The medical record will be reviewed to determine if Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision (DSM-IV TR) criteria are documented as used. The presence of narrative comments reflecting application of DSM-IV TR criteria as making the diagnosis is acceptable evidence for this measure.

The suggested time period for data collection is a calendar month.

\*New diagnosis = no diagnosis in the six-month period prior to the target quarter.

#### DENOMINATOR SAMPLING FRAME

Patients associated with provider

#### DENOMINATOR INCLUSIONS/EXCLUSIONS

##### Inclusions

Number of primary care patients reviewed greater than 18 years with new diagnosis\* of major depression in the previous six months

Suggested International Classification of Diseases, Ninth Revision (ICD-9) codes include: 296.2x, 296.3x

\*New diagnosis = no diagnosis in the six-month period prior to the target quarter.

##### Exclusions

Unspecified

#### RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

#### DENOMINATOR (INDEX) EVENT

Clinical Condition

#### DENOMINATOR TIME WINDOW

Time window precedes index event

#### NUMERATOR INCLUSIONS/EXCLUSIONS

##### Inclusions

Number of patients who have a depression follow-up contact\* within three months or initiating treatment

\*Contact = an office visit with physician or other care provider, phone, other.

Exclusions  
Unspecified

#### MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

#### NUMERATOR TIME WINDOW

Fixed time period

#### DATA SOURCE

Administrative data  
Medical record

#### LEVEL OF DETERMINATION OF QUALITY

Individual Case

#### PRE-EXISTING INSTRUMENT USED

Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text  
Revision (DSM-IV TR)

### Computation of the Measure

#### SCORING

Rate

#### INTERPRETATION OF SCORE

Better quality is associated with a higher score

#### ALLOWANCE FOR PATIENT FACTORS

Unspecified

#### STANDARD OF COMPARISON

Internal time comparison

### Evaluation of Measure Properties

#### EXTENT OF MEASURE TESTING

Unspecified

## Identifying Information

### ORIGINAL TITLE

Percentage of patients who have a depression follow-up contact within three months of initiating treatment.

### MEASURE COLLECTION

[Major Depression in Adults in Primary Care Measures](#)

### DEVELOPER

Institute for Clinical Systems Improvement

### ADAPTATION

Measure was not adapted from another source.

### RELEASE DATE

2004 May

### REVISION DATE

2006 May

### MEASURE STATUS

This is the current release of the measure.

This measure updates a previous version: Institute for Clinical Systems Improvement (ICSI). Major depression in adults in primary care. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2004 May. 78 p.

### SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Major depression in adults in primary care. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2006 May. 81 p. [201 references]

### MEASURE AVAILABILITY

The individual measure, "Percentage of patients who have a depression follow-up contact within three months of initiating treatment," is published in "Health Care Guideline: Major Depression in Adults in Primary Care." This document is available from the [Institute for Clinical Systems Improvement \(ICSI\) Web site](#).

For more information, contact ICSI at, 8009 34th Avenue South, Suite 1200, Bloomington, MN 55425; phone: 952-814-7060; fax: 952-858-9675; Web site: [www.icsi.org](http://www.icsi.org); e-mail: [icsi.info@icsi.org](mailto:icsi.info@icsi.org).

## NQMC STATUS

This NQMC summary was completed by ECRI on August 18, 2004. This NQMC summary was updated by ECRI on July 11, 2006.

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